ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	il ., ALS	ID NO.	DATE
FEE DETERMINATION			1
O.I.P.E. CLASSIFIER	150	32	3/5
FORMALITY REVIEW	NN ,	778	1/3/13/01
RESPONSE FORMALITY REVIEW	SIN	109/	6-21-01

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Rejected	N Non-elected
= Allowed	I Interference
— (Through numeral) Canceled	A Appeal
÷ Restricted	O Objected

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Ctaim	Date	Claim Date	Claim Date
Final Original		Original Original	Original Original
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If more than 150 claims or 10 actions staple additional sheet here